more than 50 meg. (equivalent to Ethenyle Estfradqil) and of progrestine content of more than 3 mg. (equivalent to Norethis-terene Acetate).

S«ttag up of A National Institute of Maternal and Child Health

1351. SHRIMATl SUDHA VIJAY JOSHI: Will the Minister of HEALTH *AViD* FAMILY WELFARE be pleased to stele:

(a) whether the. Government of India have initiated suggestions from States for a suitable location for setting up a National Institute of Maternal and Child Htislth:

(b) whether in response to the same. the Maharashtra Covernment proposed that the institute be located at Nagpur and promised fo provide the necessary infra structural facilities for the same; and

ie) if so. the reaction of Government thereto?

THE MINISTER OF STATE IM THE MN ISTRY OF HEALTH AND FAMIILY WELFARE (KUMARI SAROJ KHAPAR. DE): (a) and (b) Yes, Sir.

(c) National Institute of Maternal and Oiild Health could not be set up during the 7th Plan .is fund is not available for the project.

Sale of sweets in Kendriya Bhandar

1352. SHRI SOHAN LAL DHUSIYA: Will the PRIME MINISTER be pleased tO *<':\te:*

fa) whether it is a fact that the practice to se" sweets through the Branches of Kendriya Bhandar in Delhi/New Delhi have new been discontinued:

(b) if so, the reasons therefor: and

(c) ty when, the practice will again be continue.^ for the benefit of consumers on occasion of certain festivals?

THE MINISTER OF STATE IN THE MINISTRY OF PERSONNEL PUBLIC GRIEVANCES AND PENSIONS AND THE MINISTER OF STATE IN THE MINISTRY OF HOME AFFAIRS (SHRl P. CHIDAMBARAM): (a) Yes Sir.

(b) Due to non-availability of requirehd expertise, hygienic problems and lack *of* infrastructural facilities with the organisation.

(c) The primary object of the Kendriya Bhandar is to supply essential commodities to the consumers and stationery to the Government Departments. Further in view of the facts, mentioned at para (b) above there is no proposal to restore the sale of sweets on the occasion of festivals.

Purchase of medicines for the C.G.HJfc Unani dispensaries in Delhi

1353. SHRT SOHAN LAL DHUSIYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the average amount allocated for purchase of medicines in Central Govern ment Health Schemes Unani dispensaries in Delhi/New Delhi annually;

(b) what was the amount spent (month-wise) by Central Government Health Schemes Unani Store New Delhi out of the amount allocated during the period lst April (988 fo 28th February, 1989;

(c) whether there was any type of avoidable delay in purchase of majority of medicines which resulted in harrassment to those beneficiaries who were desirous to have Unani treatment:

(d) if so, what are the reasons there-for; and

(e) what steps Government propose to take o avoid any repetition/recurrence of this type of delay in future?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHA. PARDE): (a) to (c) The information i«

being collected and will be laid on the Table of the House.

Vacant post of Deputy Advisor (UNANI) in the Ministry of Health and Family Welfare

1354. SHRl SOHAN LAL DHUSIYA: Will ihe Minister of HEALTH AND FAMILY WELFARE be pleased to state:

ia) whither it is a fact that the post of Deputy Advisor (Unani) is lying vacant in the Ministry of Health and Family Welfare for the last so many years; if so, since whe.fi:

(b) what are the reasons for keeping this POM vacant for such a long period; and

hen it is likely to be filled up?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHA PARDE): (a) to (c) The post of Deputy Advise$_r$ (Unani) in thi$_s$ Ministry is vacant since 25-2-1985. The post has not been fill".] up so fa^T' as initially the Re-cruitmen^f Rules were to be amended. Afte- <!<1ment of the Recruitment mitter was taken up with the Union P' Mic ervice Commission as the uired to be filled up by direct The post was reserved for Scheduler' Tribe candidate. Since no person ble from this category fresh ition was sent and the post was advertised bv the Commission on 12-11-1988. 'mendations of the Commission

Lack of fnnds for health Scheme,

1355. DR. R. K. PODDAR:
SHRT MOSTAFA BIN QUASEM;

Will the Ministe,- of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news item on lack of funds for health schemes which appeared in the Times of Indi$_a$ dated ,the 2nd February, 1989;

(b) if so, the details thereof; and

(c) whether some remedial measures will be take$_n$ to improve the situation?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHA-PARDE): (a) to (c) The news item has been seen by the Government. The Government is alrady seized of the problem. Recommendations of the Conference of th$_e$ Central Council of Health and Family Welfare held 1—3 February, 1989 have been forwarded to the Planning Commission for consideration depending on their feasibility and availability of resources.

Privatisation of Defence Production by contacting foreign firms

1356. SHRI MOHAMMED AMIN: SHRI M. A. BABY;

Wil! the Minister of DEFENCE be pleased to state;

(a) whether Government are planning privatisation of defence Production by contacting foreign firms; and

(b) if so, the areas of manufacture already handed over to private agencies through foreign firms?

THE MINISTER OF STATE IN THE DEPARTMENT OF DEFENCE PRO-DUCTION AND SUPPLIES IN THE MINISTRY OF DEFENCE (SHRl CHIN-TAMANI PANIGRAHI): (a) and (b)

With regard to indigenou$_s$ pioduct'ion of Defence stores, the policy adopted by the Government is one of optimum utilisation of the capacity available in the country, be that in the Defence Secto$_r$ or Civil Sector including the Private Sector. Pursuant to this policy. $_a$ number of low-technology items have been off-loaded from the defence production units to the civil sector including the private sector. In addition whenever new weapon systems, ammunition,; or other ecroipment are being